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## 5. 510(K) SUMMARY

DATE:

October 29, 2010

**CONTACT PERSON:** 

Jesse Seidman

Baxter Healthcare Corporation

Associate Director, Global Regulatory Affairs

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McGaw Park, IL 60085

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jesse\_seidman@baxter.com

**DEVICE NAME:** 

Trade Name:

**CELSTAT** 

Common Name:

Topical Hemostatic Dressing

Classification:

Wound Dressing

Class:

Unclassified

**Product Code:** 

**FRO** 

## PREDICATE DEVICE:

Predicate 510(k)	Device Name	Indication	Clearance Date	Company
K072681	BloodSTOP and BloodSTOP iX Hemostatic Gauze	CELSTAT is indicated for topical external use in the management of topical wounds and to temporarily control moderate to severe bleeding from the skin.	November 2, 2007	LifeScience Plus, Inc., P.O. Box 60783, Palo Alto, CA 94306

Traditional 510(k) Premarket Notification CELSTAT Topical Hemostatic Dressing

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DEVICE

**DESCRIPTION:** 

CELSTAT is a topical hemostatic dressing made of oxidized cellulose. It is a sterile, biocompatible, biodegradable hemostatic material designed to temporarily control moderate to severe bleeding from the skin.

STATEMENT OF INTENDED USE:

CELSTAT is indicated for topical external use in the management of topical wounds and to temporarily control moderate to severe bleeding from the skin.

TECHNOLOGICAL CHARACTERISTICS:

The CELSTAT device is substantially equivalent to the predicate device with regard to technological characteristics, performance, and intended use.

ASSESSMENT OF NONCLINICAL DATA:

Baxter Healthcare Corporation conducts risk analysis according to the requirements of ISO 14971:2007 Medical Devices-Application of Risk Management to Medical Devices.

The device continues to meet the same material testing standards and sterilization process standards as the predicate device. Device performance has been demonstrated according to a porcine liver square model animal study and biocompatibility testing.

**CONCLUSIONS:** 

The CELSTAT device is substantially equivalent to the predicate device. Testing against established standards and guidelines for its intended use demonstrate that the proposed device is as safe and effective as the predicate device.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Room W-066-0609 Silver Spring, MD 20993-0002

Baxter Healthcare Corporation % Mr. Jesse K. Seidman, M.S. Associate Director, Global Regulatory Affairs 1620 Waukegan Road McGaw Park, Illinois 60085

MAR 2 3 2011

Re: K103245

Trade/Device Name: CELSTAT Topical Hemostatic Dressing

Regulatory Class: Unclassified

Product Code: FRO Dated: January 13, 2011 Received: January 18, 2011

Dear Mr. Seidman:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class I! (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21

Page 2 - Mr. Jesse K. Seidman, M.S.

CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <a href="http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm">http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm</a> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <a href="http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm">http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm</a>.

Sincerely yours,

Mark N. Melkerson

Director

Division of Surgical, Orthopedic and Restorative Devices Office of Device Evaluation Center for Devices and Radiological Health

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Enclosure

Page 1 of 1 Section 4 Indications for Use

## 4. INDICATIONS FOR USE STATEMENT

510(k) Number (if known):

K103245

**Device Name:** 

**CELSTAT Topical Hemostatic Dressing** 

## **Indication for Use:**

CELSTAT is indicated for topical external use in the management of topical wounds and to temporarily control moderate to severe bleeding from the skin.

Prescription Use:

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AND/OR

Over-the-Counter Use:

21 CFR 801 Subpart D

21 CFR 801 Subpart C

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Division Sign-Off)

Division of Surgical, Orthopedic,

and Restorative Devices

510(k) Number\_

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